Workers' Compensation Agency Qualifications Advisory Committee

Application for Board of Magistrates and Magistrate Examination

All applicants must fill out this form and attach a résumé. Send to: Qualifications Advisory Committee (Attn: Sue Bickel), Workers' Compensation Agency, P.O. Box 30016, Lansing, MI 48909. Qualifying applicants will be scheduled for an interview with the QAC during October 2004.

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Name				Phone		
Address				Alternate Phone		
Address				E-mail		
City		State	Zip Code	P Numb	per	
experience as	equires that applicants must an attorney in the field o	f workers' co	mpensation. Pl	ease ir	idicate below ho	w you qualify:
I have previously passed the examination. The approximate date on which I took the exam was						
I wish to take the examination on September 22, 2004.						
I have five years of legal experience as an attorney in the field of workers' compensation.						
All applicants must complete the table below. Obviously, however, this is of great importance to applicants basing their eligibility on five years of legal experience.						
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that category. devoted to wo	which of the above categor For each time period, in orkers' compensation, the as a trial practice, the nar	dicate the ap approximate	proximate percent	entage rkers' c	of your working ompensation ca	time that was ses that you worked
Category	Time Per	riod	% of	Time	No. of Cases	Magistrate
Attach a résu	mé.					
Signature			Date			